EXECUTIVE LOBBYING EMPLOYER/PRINCIPAL 'S EXPENDITURE REPORT

EMPLOYERA COVERING JANUARY 1 THROU COVERING JANUARY 1 THROU	PRINCIPAL 'S EX FORM 508 UGH JUNE 30, 2006 - DUE A UGH DECEMBER 31,	I UGUST 15		PORT
Pursuant to LSA-R.S. 49:75G(2)(a), an er required by Title 49 on behalf of <u>all</u> of it exercised this option by timely filling the of their registered executive lobbyists.	s labbyists. This reporting form is	only to be us	ed by principals :	or employers who have
Hand deliver or mail to: 2415 Quail D OR Fax to: (225) 763-8787 or (225) 763	rive, 3° Floor, Baton Rouge, LA 8780	70808		
EMPLOYER/PRINCIPAL AstraZened BUSINESS ADDRESS 1800 Concord P	ta Pharmaceuficals, LP	ton. Delawar	e 19850-5737	FOR OFFICE USE ONLY POSTMER'S DOG 10 1/02 EP (09/06) 3060923
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Street and No.	City	State	Zip	3060823
3. CONTACT PERSON; Figh	Amber		K .	
Laşı	First		MI	
4. MAILING ADDRESS, 80 South Summ	nit Street, Suite 100 Akron,	Ohio	44308	
(If different from stove) Street and No.	City	State	Zip	
5. PHONE NUMBER (330) 761-9960				
	ode and Phone Number			
6. List the names and executive lobbyist re	egistration numbers of the Jobbyls	ses on whose t	ehalf this report	is filed:
1) Name: Barnett	Stephanle		_	D.#_212
Lag	First		MI EXECT	D.#
2) Name: Barrow	Patricla		L. EVEC.	D,¢ 211
Link	First	-	MI EXECT	U,#
3) Name: Bauer	Schelble		A. EVEC II	D.# 217
Last			EXEC.II	D.#

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8) Name: Braud		М.	EXEC.IQ.#_195
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7) Name; Bonin	Loree		
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6) Name: Blisten	Keith First	A.	EXEC.ID.#_271
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) Name: Campo	Steven	M.	EXEC.ID.# 205
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i) Name: Cantralle	Kevin	M.	EXEC. D.# 315
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6) Name: Capiel	David	M.	EXEC.ID.# 207
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() Name: Cordell	Mieti	S.	EXEC. D.# 270
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) Name: Cyrus	Kerry	J.	EXEC.ID.∉ 216
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4) Name: Soileau Last		L.	_ EXEC.ID.# 218
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5) Name; Spencer	<u></u>		EXEC.ID.# 438
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6) Name: Tergerson	Michael	D.	EXEC.ID.# 241
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7) Name: Townson	Jennifer	Ł.	5000
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8) Name: Triplett	David	W.	
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6) Name: Rosenau	Samuel	C.	100	
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EXECUTIVE LOBBYING EMPLOYER/PRINCIPAL 'S EXPENDITURE REPORT ATTACHMENT

This Attachment is to be used to complete Item #8 of Form 508, the report form for principals and employers who have elected to report on behalf of their executive lobbyists. Make as many copies of this form as needed for the completion of the expenditure report. Identify each page with a number and indicate the total number of pages being submitted.

LOBBYIST	: Helmke	Rac	hel	R.	EXEC ID#_	244	
	Last	First		MI			_
A.	Total of all execut	ive lobbyling expanditu (Include expanditure; Iy	res made January 1 ti m Schedules A and 6)	hrough June 30:	s <u>2,112.76</u>		· <u> </u>
	Total of all execut	ive lobbylng oxpanditu (When Applicable) (Inc	res made July 1 throu lude expenditures from	igh December 31: Schedules A and B)	s. ^{N/A}	·	_
		lve lobbying expenditu (Adding above expenditu			\$_2,112.76		
В.	Did this lobbyist n	nake an expenditure ex	ceeding \$50 on one o	casion for an exec	utive branch offic	ial:	
		uary 1 through June 30 y 1 through December		⊠ No	Ø NA	4	
	lf the answer to ei	ther question in B abov	e is YES, complete S	thedule A and attac	th.		
C.	Did this lobbyist n	nake expenditures exca	eding the sum of \$25	0 for an executive t	branch official:		
	From January 1 th From July 1 throug	•	Yes 🔲 Yes 🔲	No (na 🗹		
	If the answer to ei	ither question in C abo	ve la YES, complete S	chedule A and arra	ch.		
D.	Did this lobbyist a executive branch o	xpand funds for any re officials were invited d	ception, social gather uring this reporting p	ing, or other functi enloc?	an ta which more	than twen	ty-five
		Yes 💆	No 🗀			- 1.1 - 1.1 - 1.1	
	If the answer to D	above is YES, complete	Schedule B and atta	ch.		1 : 6	# :

1)

	syist in a calendar year attributable to the department.	
1)	a. Name of Department: N/A	
	 Total of all expenditures made January 1 through June 30; 	\$
	 Total of all expenditures made July 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year:	s_0.00
2)	a. Name of Department: N/A	
	b. Total of all expenditures made January 1 through June 30;	s
	 Total of all expenditures made July 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year:	\$ <u>0.00</u>
3)	a. Name of Department: N/A	
	b. Total of all expenditures made January 1 through June 30:	·
	 Total of all expanditures made July 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year.	<u> </u>
1)	a. Name of Department: N/A	
	b. Total of all expenditures made January 1 through June 30:	\$ = ==
	 Total of all expenditures made July 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year:	. 0.00

E.

ا	lanuary obbyis	IDE BELOW (a) the name of the executive branch department and Individual agency as listed in the executive branch department and Individual agency as listed in the executive schedule; (b) the aggregate total of all expenditures attributed to the agency made by this tobbyist during at June 30 reporting period; (c) the aggregate total of all expenditures attributable to the agency made by the fully 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures to the aggregate total of all expenditures to the agency.
1	9	a. Name of Department and Individual Agency: N/A
		b. Total of all expenditures made January 1 through June 30:
		c. Total of all expenditures made July 1 through December 31: \$
		d. Total of all expenditures made during the calendar year: \$_\S___\ \ \
2)	ı	a. Name of Department and Individual Agency: N/A
		b. Total of all expenditures made January 1 through June 30: \$
		c. Total of all expenditures made July 1 through December 31: \$
		d. Total of all expenditures made during the calendar year: \$_0.00
3)		a. Name of Department and Individual Agency, N/A
	ı	b. Total of all expenditures made January 1 through June 30: \$
	ú	C. Total of all expenditures made July 1 through December 31: \$ (When applicable)
	c	d. Total of all expenditures made during the calendar year: \$_0.00
4)	á	n. Name of Department and Individual Agency: N/A
	b	x. Total of all expanditures made January 1 through June 30:
	c.	: Total of all expenditures made July 1 through December 31: \$
rn 308. K ey		. Total of all expenditures made during the calendar year: \$_0.00

Executive Lobbyist: Helmke	Rachel	R.	Exec. (d #:	244
	First	MI		
SCHEDULE B	EXPENDIT	RES FOR RECEPT	IONS. FT	
This Schedule must be completed if one of your oming than twenty-five executive branch officials event including the city, and the total amount exequired.	xecutive lobbyists exper	nded funds for any receptions, so	cial getherings, g	other functions to which
1. NAME(S) OF GROUP(S) INVITED	2. DATE OF RECEPTION	3. LOCATION OF RECEPTION		4. TOTAL AMOUNT O
Cardiologiste at Lallie Kemp Regional Medical Center	4/27/2006	7415 Corporate Blvd., Sul Baton Rouge, Louislana ?	te 920 '0809	\$2,112.7
			· <u>·</u>	- -
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